



JFW

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/660,807
	Filing Date	September 11, 2003
	First Named Inventor	Omaru, Atsuo
	Group Art Unit	1745
	Examiner Name	Melissa J. Austin
Total Number of Pages in This Submission	Attorney Docket Number	09792909-5671

ENCLOSURES (check all that apply)						
<input checked="" type="checkbox"/> Transmitted herewith is Amendment A in the above-identified application						
<input type="checkbox"/> The fee has been calculated as shown below:						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	8	-	10		<input type="checkbox"/> x \$25.00 <input type="checkbox"/> x \$50.00	\$
INDEPENDENT CLAIMS	1	-	1		<input type="checkbox"/> x \$100.00 <input type="checkbox"/> x \$200.00	\$
	APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR.			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> x \$180.00 <input type="checkbox"/> x \$360.00 ONE TIME	\$
	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$
<input checked="" type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated <u>November 8, 2004</u> by <u>two</u> month(s) for a fee of <u>\$450.00</u> so that the period for response is extended to <u>April 8, 2005</u> under 37 C.F.R. § 1.321.						
<input type="checkbox"/> The amount of \$_____ for the Terminal Disclaimer under 37 C.F.R. § 1.321 is included in the enclosed credit card payment form to charge .						
<input type="checkbox"/> The enclosed credit card payment form to charge the amount of \$_____ to cover the total claim fee and other applicable fees.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the extension fee and any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.						

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
14. <input checked="" type="checkbox"/> Customer No. 26263	
Dated: <u>April 8, 2005</u>	<u><i>Christopher P. Rauch</i></u> Christopher P. Rauch (Registration No. 45,034)

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.	
Dated: <u>April 8, 2005</u>	<u><i>Christopher P. Rauch</i></u>